

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X6000

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

Establishme	ent Name		of cach violation is specified in the nativative portion of the	Telephone Number	Date of In	spection	PERMIT #
		<u>_</u>	(-	(mm/dd			:
Taco icious To - Go Establishment Address (number and street, city, state, zip code)					9/30	/2019	19-377
l							
N W. 1	- let	<u> 54.</u>	Jan Albay, IN 47158	Purpose:	Follow-u	n Releas	e Date :
Davie	M	ine:	-	. Routine	No TODAY		
Owner's Ac		//·C	<u> </u>	2. Follow-up	Summary of Violations:		
,	1 77			<u>-</u>	Summary of Violations:		
Person in C	harge		<u></u>	3. Complaint	CZ NC / RQ		
Duril	Muli	Ma		4. Pre-Operational	C 2 NC - 1 R CX		
Responsible	e Person's	E-mai	I	5. Temporary Menu Type (See back of page)		of page)	
daviel	VLI010	0	gnal. come	6. HACCP		:	
Certified Fe	ood Manag	er ,		7. Other (list)	12	3_ X	45_
Kocia	Lucia	_(`	8/15/24)				
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative				orrected By
// 8	C			f d loc.	F	57	1.00
{(U	<u> </u>			from wash basin	<u>+ </u>	KLTYN	र स्था
			3-comp sink to nipe down kite	ha.			
		<u> </u>	Observed employee first to march hands between charing and				
			gooking fusks	·	, 		
294	C		Musured souther in 3-comp si	nk at 2 100 x	M	Con	rected
,				be turning gree	'1		
245	MC		Observed no smitrur buckets an	whole are rags	hma	Retrai	1 stuff
			over 3-comp sink to day		,		
			- use santier broket and cloth	0+65 -C 6464	200	o finel	
44			oland de	- 4.1. 10 Spr.	- F-T	1 Porce	.1.
211	PC		White he swither feel strips a	NAIAOR		/ W	प्राट
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Donalis 31	[[]	1 444 -	arinto d)	Inspected by June and the	neintad\.	<u> </u>	
Received by (name and title printed): Inspected by (name and title printed):							
Received by (signature): Inspected by (signature): A.). Ingram (EHS) Inspected by (signature):							
Received by (signature): Inspected by (signature):							
1 Level Mashowa M							
cc: cc:							
1					I		